FOR OFFICE USE ONLY

POLITICAL COMMITTEE CITY/TOWN OF CAMPAIGN FINANCE REPORT 2006 March/May Regular Election

Friends of Bob Caccamo
Full Name of Committee
2131 W. Maplewood St.

Address Chardles A. 05240 Marico

Chandler Az. 85248 Maricom MU-812-0685

RECEIVED

FEB 2 8 2006

CITYOFCHANDLER

2. Soonsoring Organization or Candidate and office

CO5-12

3A. ID#

DUE BETWEEN REPORTING PERIOD (Please check appropriate box) 4. Pre-Primary Election Report - For Period of January 1, 2006 thru February 22, 2006 February 23, 2006 and March 2, 2006 Pre-General Election Report - For Period of April 4, 2006 thru April 26, 2006 April 27, 2006 and May 4, 2006 Post-General Election Report - For Period of April 27, 2006 thru June 5, 2006 June 6, 2006 and June 15, 2006 **January 31 Report - For Period of June 6, 2006 thru December 31, 2007 January 1, 2008 and January 31, 2008 Column A Column B SUMMARY 5. **Election Period** Total This Total To Date Reporting Period Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee) 76.07 5b Cash on Hand at the Beginning of this Reporting Period Total Receipts (from corresponding columns on Detailed 13,040.00 Summary Page, Line 8) Subtotal [add Lines b and c for Column A and add lines 31,905.46 13 116.07 a and c for Column B] 6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines] 19,334.26 24,923.59 Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) (6,218.19) 6,981.87 Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d)

^{*}Insert date which is 21 days after date of last election (A.R.S. §16-913).

**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Friends of Bob CACCAMO 1. Committee Name: Thru 3. Report covering period from **COLUMN 8 COLUMN A** RECEIPTS CAMPAIGN TO DATE THIS PERIOD 4. Contributions other than loans and in-kind: 10,800.00 25,730.00 40.00 375.00 (a) Individuals - more than \$25 (Total from Schedule A) (b) Individuals - aggregate \$25 or less (Total from Schedule A-1) 2,700.00 6,200.00 (c) Political Committees (Total from Schedule B) 13,540,00 32,305,00 (d) Subtotal Contributions (add 4(a), 4(b), and 4(c)] 650,00 (e) Refund of contributions (Total from Schedule F-2) 13,040.00 31,655.00 (f) Total Contributions Other than Loans and In-kind (subtract 4(e) from 4(d)) 5. (a) Loans made or guaranteed by candidate (Total from Schedule C) (b) All other loans (Total from Schedule C-1) 174.39 (c) Total Loans (add 5(a) and 5(b)) 8. In-kind contributions (Total from Schedule E) 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1) 13,040.00 31,829.39 8. Total Receipts [add 4(f), 5(c), 6, and 7] QUALIFYING CONTRIBUTION RECEIPTS Qualifying Contributions of \$5 from Individuals (Total from Schedule A2). DISBURSEMENTS 18,834.26 24,773.20 9. Expenditures for operating expenses (Total from Schedule D) 10. Independent Expenditures (Total from Schedule D-1) 11, Value of In-kind expenditures (Total from Schedule E) 12. Loans made by reporting committee (Total from Schedule D-2) 150,39 13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4) (b) Repayment of all other loans (Total from Schedule D-5) 150,39 (c) Total Loan Repsyments [add 13(a) and 13(b)] 14. Transfers to other political committees (Total from Schedule D-6) 15. Any other disbursement (Total from Schedule 0-7) 19,334.26 25,923.59 16. Subtotal disbursements (add lines 9, 10, 11, 12, 13(c), 14, and 15) 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3) 19,334.26 24,923,59 18. Total disbursements (subtract line 17 from line 16) 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3) 20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and Robert (ACCAMO

Signature of Treasurer or gandidate or Designating Individual

Date

1/27/06

	1. Committee Name Friends of Bol CACCAMO	j	^{2.10} * Co5	-12
		Feb. 22	, 2006	
4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR		THIS PERIOD	CAMPAIGN TO DATE
48.	Caccamo Christine	ı		
	1525 E. Northshore Dr.	1/13/06	100.00	
	OCCUPATION HOME MAKER EMPLOYER			
	Home MAKER	•		
b.	Narmont Kathy	. i .		
	12002 S. TONALEA DE	1/13/06	50.00	
	OCCUPATION STATE ZIP COCCUPATION EMPLOYER		÷ ÷	
			•	
a.	Stalworthy Randy		•	
	4/31 N. 24th St. Corr Phoenix Az 85016	1/ /	37/1 m	
	occupation II EMPLOYER	115/06	370.00	
	HHOLNEY SEHEMPTOYED		<u>-</u> . - e	
•	Cybert Phillip		-	
	444 S Flower St			
		1/13/06	250-00	
	real estate investments Self employed			. *
	KUJNowski Andrea			
	P-0. Box 119/ Show Low Az. 85902	1/23/06	50.00	
		,		
	realfor White Mt. Realf Exec.		,	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]			

	1. Committee Name Friends of Bol CACCAMO		2. 10 # COS	1-12
		. Feb. 22	, 2004	•
4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR		PERIOD	TO DATE
44.	HALL BIADLEY STREET ADDRESS 357 18th St.	1/3/06	250-0	
	SANTA Monica CA 90402 OCCUPATION. INVESTOR Self employed			
_ b.	Brooks "Sheila"			
	STREET ADDRESS J297 5- Jay Pl. CITY Chandler AZ 85248 OCCUPATION HOME MAKER EMPLOYER	1/26/06	75.00	100,00
٠_	JONES D. LYNN		_	- ,
	STREET ADDRESS N. BULLMOOSE CIR OCCUPATION DOCTOR LAST D STREET ADDRESS NO BULLMOOSE CIR STATE STATE STATE STATE STATE STATE STATE STATE STATE MI MI MI MI STATE STATE STATE STATE STATE STATE STATE MI MI MI MI STATE STATE STATE STATE STATE STATE STATE MI MI MI MI MI MI STATE STATE	1/23/06	Jα0-00	Lossy
 4	Brooks Jerry			
	on Chandler Az. 85248	1/24/00	75.00	175.00
 e.	refired WAST THOMAS KEN			
	CITY Chandler Az 85225 OCCUPATION Let Led EMPLOYER	1/26/66	50-00	
_.		į	į i	1
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A fil lest page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column Aj	!]	

	1. Committee Name Friends of Bol CARRAMO	2.10* COS	-12
	3. Report covering period from TAN: 1, 2006 thru Feb. 22	, 2006	·
4	CONTRIBUTIONS DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	THIS PERIOD	CAMPAIGN TO DATE
44.	Pew FIRST RAIPH		
	STREET ADDRESS 1757 E. Indigo 1/26/06	250.00	
	OCCUPATION Ney STATE STA		
b.	LAKE MAST SCAN		
	2448 E. Melrose St	250.00	
	OCCUPATION HONNEY PAULLaketc. Set 126/06	•	
c.	LAST Layre FIRST Brent		
	STREET ADDRESS OF E. ENCINAS		
	GILBERT AZ 852-34 1/24/06	200-00	
	real estate drivest self employer		
đ.	Anderson Prest Reese	-	
	1005 N. Alba STATE 20 1/56/06	250.co	
	OCCUPATION GHarney STATE 85213 SMPLOYER Vew/lake etc. Se Henspl.		
•	LAST PROSCOTT TOWN	<u></u> -	
	STREET ADDRESS 12.12 E Baselino CITY TE MOR AZ: 85183 1/31/06	100-00	
	DECOMPATION Manager PKS Property Nignet		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A)		

	1. Committee Name Friend	s of Bob Checamo		2. 10 * COS	1-12
	3. Report covering period from	JAN. 1, 2006 the	, Feb. 22	, 2004	
4		CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION A	NIO EMPLOYER OR CONTRIBUTOR		THIS PERIOD	CAMPAIGN TO DATE
4.	Shields	Billy			
	STREET ADORESS 7.201 N	· Central Ave STATE AZ. 85020	1/31/06	370-00	
	OCCUPATION CONTRACTOR	AZ. 85070 htc Cityof Phoenix	7 - 17 00		
b.		PAtack Mig Mis.			
	STREET ADDRESS JE . NO	11 -		_	•
	on Phoenix	STATE 28 5070	1/31/06	100.00	
	OCCUPATION CHEVER / Party	STATE AZ EMPLOYER AMBULANCO		•	
C.	RAMSCY STREET ADDRESS	Boh	1 1	ر. دعات	
	13/2 E.	COMMODORE. PI	1/31/06	5/0·00	
	occupation per	Her & SSJ82 Aner & MT Ambukna			
đ	Avale	Michelle		-	
	STREET ADDRESS	E PAlo Verde Dr STATE AZ. 85018	.//	26	
	om Phoenix	STATE RSD18	1/31/06	350.00	
	OCCUPATION LXEC COST	EMPLOYER			F ***
€.	JAY NO	FIRST MI		10000	
	200 (8	N. 184 St.	1/31/06	[00.00 ≨	
	Phaenix	At. 85027	• •		
	OCCUPATION OWNOL	CLANCE CONSUlting		1	1
5.	ENTER TOTAL ONLY IF LAST PAGE OF Summery Page Line 4(2), Column AJ	F SCHEDULE A (If last page of Schedule A, transfer total to Detailed			1

	1. Committee Name Friends of Bol CARCAMO	2.10* COS	-12
	3. Report covering period from TAN. 1, 2006 thru Feb. 22	, 2004	
4	CONTRIBUTIONS DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	THIS PERIOD	CAMPAIGN TO DATE
42.	ROCKIN BOATTICE		
	J077 E. Warner Rd # 110 STATE 85284 /31/06	150-08	
b.	OCCUPATION S6/85 MGT Benton-Robb LAST COSI FIRST AND FORD MI	e marine e Su	,
	ORTMAN MARK STREET ADDRESS 319 W. Gleneagles		
	Phoenix Az 85203 1/31/06	300.00	
	INVESTMENT Consultant El Diado Holdings		
c.	Bricker Debra STREET ADDRESS 5830 E. Restin Rd.	15000	
	STATE CAVE CREEK AZ 85331 1/31/06 OCCUPATION: INVESTOR EMPLOYER DERADO/Old/NO	(50-00	
đ.	LAST TUGYAM MIKE STREET ADDRESS		e entre .
	1341 E Dosert WillowRd	300.00	
	Phoenix Az 85048 /31/06 OCCUPATION Principal El Dorado Holding		
•	Ly/e5 Robert Mrs Mrs. STREET ADDRESS - 2		
	STREET ADDRESS 11247 E (Grol Ave CITY Scotls dale Az. 85049 1/31/06	370.w	
	under invegtor/Landinust Self confloyed		•
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		

	1 Committee Name Friends of Bob CACCAMO		2. 1D# CO5	-12
	1. Committee Name Tenas Tan. 1, 2006 thru Feb. 2	22	7004	,
4	CONTRIBUTIONS DATE RECEIVED)	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR		THIS PERIOD	CAMPAIGN TO DATE
4 a .	Watts Patricia			
	STREET ADDRESS 4/34 Ripple Rd CITY STATE ZIP 1/3/06		570-00	
	W. Vancouver BC V/V321			
	OCCUPATION STOCK INVEST WHEN SEH EMPloyed			
ъ.	STREET ADDRESS		-	·
	STREET ADDRESS 4707 E ACCADIA LN STATE TO DISTANCE 1/31/0	6	100.00	
	occupation in the star septemble of the		•	
<u>د</u>	ust FIRST		· · · · ·	
	STREET LOOKESS E State fue		100-00	
	arr Phoenix AP 85020 1/31/0	6	100-00	
	realistate Invest Region Robb			
d.	Robh Ross			
	STREET ADDRESS 1/31/0 STATE DP 1/31/0	6	150.00	
	1empe 17 85,280	G		
	COCCUPATION PENTON - Rot D LAST FREST MI		**···	
	Smith Mike			
	9302 5 Willow 1/3/2	Ь	150.00	
	CITY STATE 25 /31/0. CMPC AT 852 48 OCCUPATION COUNTY BENTYER DESTROYER DESTROYER DESTROYER	_		
			1	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [if lest page of Schedule A, transfer total to Detailed Summary Page Line 4(2), Column A]]	

	1. Committee Name Friends of Bol CARRAMO	2.10* COS	-12
	3. Report covering period from JAN. 1, 2006 thru Feb. 22	, 2006	•
4	CONTRIBUTIONS DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	THIS PERIOD	CAMPAIGN TO DATE
42.	SACCO ISEPH		
	5701 N. Monte Vista Dr 1/31/06	150-00	
	OCCUPATION ON Hactor Schemologes		
b.	LAST SMITH TIMOTHY	. "	
	8238 E. Thamas Rd	150.cm	
	CITY Scottsdale AZ. 85051 1/31/06 OCCUPATION; NUESTON BENFOR ROBB	•	
¢.	Renton FIRST-John		***************************************
	STREET ADDRESS P. D. BOX 3119	150-ω	
	occupation for Benton-Robb		
đ.	Abraham Andrew		
	STREET ADDRESS 58 29 E. Joshua Kee LU CITY Description 1/31/06	952 m	
	Paradise Valley 12. 65253 /31/06 occupation realestate investments Seff employed	J-XV-W	
0.	Bull Eq.	,	·
	3835 E SALUTO Blud 1/31/06	J50-0	
	Phoenix HZ 85078 OCCUPATION Afformey Birch g(RAChido		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDURE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]		

	Committee Name Friends of Bob CACCAMO	2. 10 # CO!	5-12			
	1. Committee Name TIENAS PT SAB CAREAM! 3. Report covering period from TAN. 1,2006 thru Feb. 22	1004	•			
4	CONTRIBUTIONS DATE RECEIVED	AMOUNT RECEIVED THIS	CUMULATIVE TOTAL THIS CAMPAIGN			
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	PERIOD	TO DATE			
44	STREET ADDRESS GOG SPARROW PL. CITY CHANCLER HZ 85248	150.00				
	occupation EMPLOYER FORESITE					
b.	STREET ADDRESS STREET ADDRESS N. 9th Auc OCCUPATION Horney STATE EMPLOYER GOODMAN Swartz	/CQ · 00				
c	STREET ADDRESS P. O. BOX 1630 CITY Chandler AZ 85244 2/10/06 OCCUPATION EMPLOYER Brown Ins. 19cm(4)	\$ 150.00	, <u> </u>			
d.	STREET ADDRESS STREET ADDRESS DIDIW Maplewood St CITY Chandler A7 85245 OCCUPATION doctor Remployer to the Hopital	100.00				
	STREET ADDRESS 45 45 W. 42 2 5t Hacinda Solt 2 CITY Phoenix HZ 85018 OCCUPATION Hyperty Mgnt/development J. M. Management An	} €v · ∞				
5.	ENTER TOTAL ONLY IN LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summery Page Line 4(z), Column A)					
*If con them o	"If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include Page of July them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.					

	1. Committee Name Friends of Bol CACCAME	2 10 ° COS	-12
	3. Report covering period from TAN. 1, 2006 thru RL 22	1006	
4	CONTRIBUTIONS DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR	THIS PERIOD	CAMPAIGN TO DATE
la.	Whitehead James		
	STREET ADORESS 5/4/N, 40th St. Suite \$1/00 CITY MOERIEL AZ 850/8 2/18/06 OCCUPATION EMPLOYER 11	250.00	
	occupation mg / devel. S.W. Management		
b.	Schubert WC		* 11 4 Mar 1
,	CITY DE STATE 200 2/18/06	350-00	
	OCCUPATION OCCUPATION FUNCIPAL STATE TO RS016 2/18/06 EMPLOYER KITCHELL CONTE	•	
د	ust Sleeth Mark		
	STREET ADDRÉSS 54/6 E. Calle Ventura CITY Phoenix HZ. 850/8 2/16/06 OCCUPATION	350.00	
	OCCUPATION 1 A SECULAR		
d.	LAST allen FIRST they		
	78/8 N. M. Maco	350.00	
	occupation Chemilogies Rifichell Clarks.	*··	
•	MC Guaid Mr + Mw Peter		
	27/9 E (arien R) STATE STATE STATE S5042 2/18/06	50,00	
	occupation Employer T. M. Management de		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summery Page Line 4(z), Column A]		

	1. Committee Name Friend	e of B.	L CAR	CAMO		2.10* CO5	-12
	3. Report covering period from	JAN. 1, 2	006	thru	Feb. 22	, 2006	
4		CONTRIBUTIONS			DATE RECEIVED	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	NAME, ADDRESS, OCCUPATION A	ND EMPLOYER OR (CONTRIBUTOR		RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
4.	DAVIDON STREET ADDRESS 1130 E	FIRST Ga., M; SS		he#850			
		lowver D	MPLOYER WIDSON		2/18/06	250.00	
b.	STREET ADDRESS	SIAIE	in the	#850			
 C	real estate /	Principal FIRST Will	DAVIDSON	4 Myes	2/18/08	750.00	. . .
			Suite 856 Marchaell S	0/6	2/18/06	250.00	
ď.	LAST STREET ADDRESS	FIRST	·				
	CITY	STATE	ZIP				
	OCCUPATION	1	EMPLOYER				
•.	LAST	FIRST		 Mil	. **		-
	STREET ADDRESS						
	СПУ	STATE	ZIP				
	OCCUPATION	1	EMPLOYER				
5.	ENTER TOTAL ONLY IF LAST PAGE OF Summery Page Line 4(z), Column A) tributions of \$25 or less are listed with contri				ot include	10,800,0d	25,730,00 Page 10 of 1

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

Triends of Bob Cacrang (05-12 from Jan., 2006 thru Feb. 22 2006

CUMULATIVE

TOTAL THIS CAMPAIGN TO DATE

4. Aggregate Total of Contributions of \$25 or less

DESCRIPTION

Yvetle Rosales Gregoutton

AMOUNT RECEIVED THIS PERIOD

20,00

5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]

6. CUMMULATIVE TOTAL THIS

*If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

	1. Committee Name	Friends of Bob CACCAN	40 2. 10# COS	-12
	3. Report covering period	from Tanl, 2006 thru F	E6.72	200 p
4		CONTRIBUTIONS	AMOUNT RECEIVED	CUMULATIVE TOTAL THIS
	IDE	NTITY OF CONTRIBUTOR AND DATE RECEIVED	THIS PERIOD	CAMPAIGN TO DATE
4a	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP Phoenix Firefighter book 493 61 E. Columbus Aug.	500·α	
	10# \$\$CO -01524 DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP LING FED SUNC HY Furfighten PAC P.C. Prox 2085 SUN CHY AZ 85372	250.00	v
- d	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP Lenited Marcaga County Tropighted MC 7024E OSbarn Rd Stoffs dal B A > 85251	J50, ∞	
d.	D# 01129 DATE RECEIVED 6	AMA DAC 5110 N 44 th St # 2160 5110 N aerix, 172 85018	J <i>0</i> 0. 00	,
e.	DATE RECEIVED	NAME, ADDRESS, CITY, STATE AND ZIP /AC SEVRAN Suffer /AC 255 E OS BOLD Pd #200 25021	1,500.00	
f.	ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
g.	l ID#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	10#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	!D#	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]

2,700.00

CANDIDATE LOANS

SCHEDULE C

i.	Committee Name	Trends	of Bol Cace and
3.	Report covering period	from	(111106 thru 44106

4. LOANS MADE OR GUARANTEED BY CANDIDATE

DATE RECEIVED

AMOUNT RECEIVED CUMULATIVE TOTAL THIS CAMPAIGN TO DATE

NAME AND ADDRESS FROM WHOM RECEIVED

4a. NAME, ADDRESS, CITY, STATE, AND ZIP

DESCRIPTION

b. NAME, ADDRESS, CITY, STATE, AND ZIP

DESCRIPTION

NAME, ADDRESS, CITY, STATE, AND ZIP

DESCRIPTION

d. NAME, ADDRESS, CITY, STATE, AND ZIP

DESCRIPTION

NAME, ADDRESS, CITY, STATE, AND ZIP

DESCRIPTION

NAME, ADDRESS, CITY, STATE, AND ZIP

DESCRIPTION

ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]

Schedule C Page ____of___

	OTHER LOANS	SCF	IEDULE C1
1.	OTHER LOANS Committee Name French of Bob Cacean Report covering period from 1/1/0 6 thru 2/22/06	2.10# COS -/	12
3.	Report covering period from / / / / U () that U / U C / U		
4	ALL OTHER LOANS DATE	AMOUNT	CUMULATIVE TOTAL THIS
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.	OF LOAN	CAMPAIGN TO DATE
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND IC#		
	DESCRIPTION		
45	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		
	DESCRIPTION		
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		
	DESCRIPTION		
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]

NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#

DESCRIPTION



EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

	1. Committee Name Triends of Sob Cae como	2.10* COS	5-12
	1. Committee Name 3. Report covering period from Jan 1 2006 thru 746 2	2 2	006
4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
44	NAME, ADDRESS, CITY, STATE AND ZIP RAND ALL KIRBY Are Musice 10213 - Crescent Are Musice 42.85208	1/23/06	70.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED date and modify website	, .	<u> </u>
b.	NAME, ADDRESS, CITY, STATE AND ZIP JESSICA FLOREZ. HA Ave 8823 N. 13 HA Ave Phaenix AZ 85023	2/8/6	1000.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Consultant Serv.		
C.	NAME, ADDRESS, CITY, STATE AND 200 Daug Reith Many & Ave 15 437 N/3 th Ave Phoenix Az 85023	2/8/06	40.70
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
a .	NAME, ADDRESS, CITY, STATE AND ZIP Kaasa Multon & Keith man 16 12 to Calle Santa Cruz 16 Phoinix AZ 85022	2/16/06	1,500.00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED Consulting (20)	,	
•.	537 E. OSBORN RU Phoenix Az 85012	2/18/06	795.15
	DESCRIPTION OF ITEMS OR SERVICES FURCHASED ballet (hase Call)		
ŧ.	NAME, ADDRESS, CITY, STATE AND ZIP		
	OFFICE OF TRUE OF PROPERTY DISPOSED		

"Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If faul page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]

EXPENDITURES FOR OPERATING EXPENSES*

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

	1. Committee Name Triends of Bot Caccano	2.10#C05	-12
	1. Committee Name Tuesday 2006 thru 766 22	-	1006
ı	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
2	NAME, ADDRESS, CITY, STATE AND ZIP / - / /		
-	NAME, ADDRESS, CITY, STATE AND ZIP The Graphers Links D. O. Day 26054 Phaenix Az 85068	2/18/06	491.32
	DESCRIPTION OF ITEMS, OR SERVICES PURCHASED Cance of Mail flyer	***	~.
b.	NAME, ADDRESS, CITY, STATE AND ZIP The Graphics Link P. O. Box 26 8 hoening AZ 95068	2/19/2	3,542.81
	Postage and Muching - Chase leterhlun		· "
<u>.</u>	NAME, ADDRESS, CITY, STATE AND ZO Survey & Consulting Shoey &C 537 E. OSbern Ed Phoency A 765012	247	Zu ./ 5
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED (NESE Calls Round # 2	r/10/06	۱۱۰۹ <i>۵</i>
d.	Graphishinh Charge AZ	1/4/06	2,943.88
	Vate by mail printing and Mail exp	···· · · · · · · · · · · · · · · · · ·	
•.	NAME, ADDRESS, CITY, STATE AND ZIP US POSTOl Services Anderson Spring Station	1/13/06	39-00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED YOUR OF Stary - Thank you will		-
t.	NAME ADDRESS, CITY, STATE AND ZIP (: ty Clark - City af Chandle, 55 N. Az frog 5244	1/17/06	100,00
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED LOUIS VOTE 5		
5.	SHTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (if last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		

EXPENDITURES FOR OPERATING EXPENSES*

	1. Committee Name Triends of Boll Caccom Ton 1 2006 thru Feb 3	2.10.05-	12-
	1. Committee Name Tan 2006 thru 7eb 3	2 200	06
4	EXPENDITURES	DATE EXPENDITURE	AMOUNT OF THE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE	MADE	EXPENDITURE
44.	NAME ADDRESS, CITY, STATE AND ZO Kasia Multon i Reithman 1612 E Calle Santa Cry Phoenix AZ 55022.	1/19/06	1000-00
ود	Carried Conselling Fees		
•	The Coraphies Link P. O Box 2605-1/2 A2 1506	1/19/06	7,000.00
	DESCRIPTION OF ITEMS OR PERVICES PORCHASED A balfor Printing inun tator	77 17 00	. *
•	NAME, ADDRESS, CITY, STATE AND ZIP	• .:	
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZP		
•	DESCRIPTION OF ITSMS OR SERVICES PURCHASED		
•.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
٠ <u>-</u>	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		1
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE O (If leaf page of Schedule D, transfer total to Dated Summary Page Line 9, Column A)		18834.24
	"Expenditures, other then a contract, promise or agreement to make an expenditure resulting in credit		Page 3 or 3

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

	1. Committee Name Lucids of Bolo Caccomo 2. 10# (55 -12) 3. Report covering period from 1/1/06 thru 2/22/06
4	INDEPENDENT EXPENDITURES DATE AMOUNT EXPENDITURE OF THE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED
4a .	NAME, ADDRESS, CITY, STATE AND ZIP
	PURPOSE AND DESCRIPTION OF PURCHASE Benefited G Opposed C CANDIDATE OFFICE SOUGHT YEAR OF ELECTION
4b.	NAME, ADDRESS, CITY, STATE AND ZIP
4 c.	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION NAME, ADDRESS, CITY, STATE AND ZIP
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted Opposed CANDIDATE OFFICE SOUGHT YEAR OF ELECTION
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE 0-1 [If last page of Schedule 0-1, transfer total to Detailed Summary Page Line 10, Column A]
l certin	ify, under pently of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the stor suggestion of any candidate or any campaign committee or agent of that candidate. A different consultation or concert with or at the store and the candidate. The consultation or concert with or at the candidate.
	NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST AMOUNT SIX MONTHS

Schedule D-1 Page ___of ___

LOANS MADE BY REPORTING COMMITTEE

	1. Committee Name Triends of Sol Caccani 3. Report covering period from 1/1/06 thru 2/2	2.10#	-12-
4	3. Report covering period from /// D U thru Z / LOANS MADE BY THE REPORTING COMMITTEE	DATE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE	LOAN MADE	OF THE LOAN
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		·
د	NAME, ADDRESS, CITY, STATE, ZIP, AND IO#		
đ.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
6 .	NAME, ADORESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#	! 	
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i,	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 [Transfer total to Detail Summary Page Line 12, Column A]	,	-0-
			Page of

OFFSETS TO OPERATING EXPENSES *

	1. Committee Name Friends of Bob CACCAMO CO 3. Report covering period from 1/1/8-6 thru 2/27/06	5-1	2
	REBATES, REFUNDS AND OTHER OFFSETS TO OFERATING EXPENSES	FUND	AMOUNT OF THE
	NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED	CEIVED	REFUND
	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
	NAME, ADDRESS, CITY, STATE, AND ZIP	2.7	
	'n		
	DESCRIPTION OF REFUND	,	
	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
ī.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE 0-3 [If last page of Schedule 0-3, transfer total to Detailed Summary Page Line 17 Column A]		<i>(</i>
•	Includes return of contributions made by reporting committee		Page of
		Schedule D-3	eage_/_of

REPAYMENT OF CANDIDATE LOANS

	1. Committee Name 1. Committee	2 10# (05-12)
	REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE	DATE AMOUNT REPAYMENT OF THE MADE REPAYMENT
	NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	
42.	NAME, ADDRESS, CITY, STATE, AND ZIP	
b.	NAME, ADDRESS, CITY, STATE, AND ZIP	
c.	NAME, ADDRESS, CITY, STATE, AND ZIP	• 4
d.	NAME, ADDRESS, CITY, STATE, AND ZIP	
€.	NAME, ADDRESS, CITY, STATE, AND ZIP	
ſ.	NAME, ADDRESS, CITY, STATE, AND ZIP	-
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE 0-4 [Transfer total to Detail Summary Page, Line 13(a), Column A	

REPAYMENT OF ALL OTHER LOANS

REPAYMENT OF ALL OTHER LOANS NAME AND ADDRESS OF INDIVIDUAL (OR NAME, IDP AND ADDRESS OF THE POLITICAL COMMITTEE) NAME, ADDRESS, CITY, STATE, IDP AND IDP NAM		1. Committee Name Liench of Lat Cae (cm) 3. Report covering period from 1/1/06 thru 2/22	2.10#	-/2_
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE NAME, ADDRESS, CITY, STATE, ZIP AND ID#	4	REPAYMENT OF ALL OTHER LOANS	REPAYMENT	OF THE
NAME, ADDRESS, CITY, STATE, ZIP AND ID#		NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE	MADE	REPAYMENT
C. NAME, ADDRESS, CITY, STATE, ZIP AND ION 1. NAME, ADDRESS, CITY, STATE, ZIP AND ION 1. NAME, ADDRESS, CITY, STATE, ZIP AND ION 1. NAME, ADDRESS, CITY, STATE, ZIP AND ION	a .	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
C. NAME, ADDRESS, CITY, STATE, ZIP AND ION 1. NAME, ADDRESS, CITY, STATE, ZIP AND ION 1. NAME, ADDRESS, CITY, STATE, ZIP AND ION 1. NAME, ADDRESS, CITY, STATE, ZIP AND ION		MAME ADDRESS CITY STATE 7/9 AND ICH		
d. NAME, ADDRESS, CITY, STATE, ZIP AND ID# 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID#		TOWIC, ADDITION, OT 1, OTHERS, MICHAEL		
d. NAME, ADDRESS, CITY, STATE, ZIP AND ID# 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
d. NAME, ADDRESS, CITY, STATE, ZIP AND ID# 1. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	C.		• •	
f. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	d.		,	
f. NAME, ADDRESS, CITY, STATE, ZIP AND ID#	_	NAME ADDRESS CITY, STATE, ZIP AND ID#		
· · · · · · · · · · · · · · · · · · ·				
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 (Transfer total to Detailed Summary Page, Line 13(b), Column A) Page of	ſ.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 (Transfer total to Detailed Summary Page, Line 13(b), Column A) Page of				
Page / of _	5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 (Transfer total to Detailed Summary Page, Line 13(b), Column A		-0-
		I		Pageof

TRANSFERS TO OTHER POLITICAL COMMITTEES

	1. Committee Name 1. Committee Name 1. Committee Name 1. Cond.) 9 Sol Caccura thru 2.	2.10#	-/2_
4	TRANSFERS MADE BY THE REPORTING COMMITTEE	OATE TRANSFER MADE	AMOUNT OF THE TRANSFER
42. _.	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		₹°
c.	NAME, ADDRESS, CITY, STATE, ZIP AND IO#	\$ ·	
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
6 .	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
r.	NAME, ADDRESS, CITY, STATE, ZIP AND ICH		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE 0-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		Page of

ANY OTHER DISBURSEMENT 1. Committee Name Transl of Soft Cacce and 3. Report covering period from 1/1/06 thru 2/2	_
ANY OTHER DISBURSEMENTS NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION NAME, ADDRESS, CITY, STATE, ZIP AND ID#	DATE AMOUNT DISBURSEMENT OF THE MADE DISBURSEMENT
DESCRIPTION	
NAME, ADDRESS, CITY, STATE, ZIP AND IO#	
DESCRIPTION NAME, ADDRESS, CITY, STATE, ZIP AND ID#	. **
) DESCRIPTION	• *
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	
DESCRIPTION NAME, ADDRESS, CITY, STATE, ZIP AND 10#	

ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 [Transfer total to Detailed Summary Page Line 15 Column A]

DESCRIPTION

	IN-KIND CONTRIBUTIONS	and EXPENDITURES	SCHEDULE $oldsymbol{E}$
	1. Committee Name Flien(b)	of Bol Caceano 19/06 mm 2/221	2.10#(05 -12
	3. Report covering period from	19/06 thru 2/221	06
4	IN-KIND CONTRIBUTION	S and EXPENDITURES	DATE FAIR MARKET VALUE
	NAME AND ADDRESS OF INDIVIDUAL (POLITICAL COMMITTEE) FROM WHO	OR NAME, ADDRESS AND ID# OF THE DM RECEIVED OR TO WHOM GIVEN	
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION CI	
	DESCRIPTION		
	OCCUPATION	EMPLOYER	
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION C	s
	DESCRIPTION	l e e e e e e e e e e e e e e e e e e e	
	OCCUPATION	EMPLOYER	• ·
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	; CONTRIBUTION CI EXPENDITURE CI	
	DESCRIPTION	}	·
	OCCUPATION	EMPLOYER	
d.	NAME, ADDRESS, CITY, STATE, ZIP AND IO#	CONTRIBUTION C	
	DESCRIPTION	1	
	OCCUPATION	EMPLOYER	
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PA	GE OF SCHEDULE E [If lest page of Schedule E, transfer total to Detaile	od Summary Page

ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A)

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page
Line 7 Column A

SCHEDULE F-1

Page ____of ___

1. Committee Name 1. Committee	2.10#	-/2
DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
DESCRIPTION OF RECEIPT		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	-	
DESCRIPTION OF RECEIPT NAME, ADDRESS, CITY, STATE, ZIP AND ID#	÷ 7	
DESCRIPTION OF RECEIPT	•	
NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
DESCRIPTION OF RECEIPT NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
DESCRIPTION OF RECEIPT		
NAME, ADDRESS, CITY, STATE, ZIP AND IO#		
DESCRIPTION OF RECEIPT		

	1. Committee Name Nends of Bob Caccano 2. II 3. Report covering period from John John 2006 thru Feb 2)	200	·12
4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE	MADE	NG GNG
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# Phillip Cyburt 4445 Flower St LOS Angeles (A 90071) DESCRIPTION OF REFUND	/20/06	500 00
ъ.	NAME, ADORESS, CITY, STATE, ZIP AND ID#	•	
	DESCRIPTION OF REFUND	• 2	
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
		,	
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
e .	NAME, ADDRESS, CITY, STATE, ZIP AND IO#		
	DESCRIPTION OF REFUND		
t.	NAME, ADDRESS, CITY, STATE, ZIP AND IO#		
	DESCRIPTION OF REFUND		
	S. D. Lander and J. C. D. Company of the Common Common Common Line 4/F)	Column Al	500.00
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Includes return of contributions received by reporting committee	- 1	
			Pageof

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

Triends of Sol Callane | 1/1/06 thru 2/27/06

3. Report covering period from

DEBTS AND OBLIGATIONS

NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED

NAME, ADDRESS, CITY, STATE, ZIP AND ID#

OUTSTANDING BALANCE BEGINNING THIS PERIOD

AMOUNT INCURRED THIS PERIOD

PAYMENT THIS PERIOD

OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD

DESCRIPTION OF DEBT





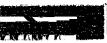




NAME, ADDRESS, CITY, STATE, ZIP AND ID#

DESCRIPTION OF DEBT









NAME, ADDRESS, CITY, STATE, ZIP AND ID#

DESCRIPTION OF DEBT









NAME, ADDRESS, CITY, STATE, ZIP AND ID#

DESCRIPTION OF DEBT









NAME, ADDRESS, CITY, STATE, ZIP AND ID#

DESCRIPTION OF DEBT









ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [Transfer total to Detail Summary Page Line 19, Column A]

